

LEFT AVAIL COPY

POSITION	ID NO.	DATE
CLASSIFIER	49	1/14/93
EXAMINER		
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Ref	Date
1	Original	1/11/93
2	✓	4/7/93
3	✓	8/2/93
4	✓	1/16/94
5	✓	4/6/94
6	✓	12/1/94
7	✓	1/4/95
8	✓	1/24/95
9	✓	2/2/95
10	✓	2/3/95
11	✓	2/3/95
12	✓	2/3/95
13	✓	2/3/95
14	✓	2/3/95
15	✓	2/3/95
16	✓	2/3/95
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SYMBOLS

✓	Rejected
=	Allowed
- (Through number)	Canceled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
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